

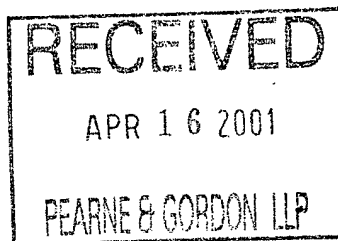
UNITED STATES PATENT AND TRADEMARK OFFICE

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APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTY. DOCKET NO.	DRAWINGS	TOT CLAIMS	IND CLAIMS
09/687,558	10/13/2000	2681	920	33045	6	6	4

CONFIRMATION NO. 9039

000116
PEARNE & GORDON LLP
526 SUPERIOR AVENUE EAST
SUITE 1200
CLEVELAND, OH 44114-1484



UPDATED FILING RECEIPT



OC000000005951675

Date Mailed: 04/10/2001

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the PTO processes the reply to the Notice, the PTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

Applicant(s)

Tetsuya Kubo, Kanagawa, JAPAN;
Kouichi Yamamoto, Kanagawa, JAPAN;
Akinori Ohira, Kanagawa, JAPAN;
Yukinari Inoue, Shizuoka, JAPAN;

Domestic Priority data as claimed by applicant**Foreign Applications**

JAPAN HEI. 11-294010 10/15/1999

If Required, Foreign Filing License Granted 11/17/2000**Projected Publication Date: N/A****Non-Publication Request: No****Early Publication Request: No****Title**

Portable cellular phone

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SEP 05 2001
Technology Center 2600

Preliminary Class
455

Data entry by : TEKLEMICHAEL, MULU

Team : OIPE

Date: 04/10/2001





Receipt

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Tetsuya Kubo, et al.
Serial No.: 09/687,558 Art Unit: 2681
Filed: October 13, 2000
Title: "PORTABLE CELLULAR PHONE"
Docket No.: 33045

2nd LETTER REQUESTING
CORRECTED FILING RECEIPT

Asst. Commissioner of Patents
Office of Initial Patent Examination
Customer Service Center
Washington, D.C. 20231

Sir/Madam:

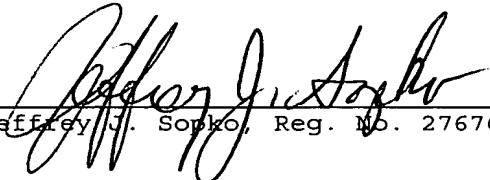
Enclosed is a copy of the Official Filing Receipt for the above-identified application. The receipt contains an error in the "Applicant(s)" section of the receipt. The section should read as follows:

Applicant(s)
Tetsuya Kubo
Koichi Yamamoto
Akinori Ohira
Yukinari Inoue

Please issue a corrected filing receipt for this application and forward the same to the undersigned attorney of record.

Respectfully submitted,

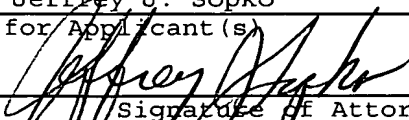
PEARNE & GORDON LLP

By 
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May 29, 2001

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington D.C. 20231 on the date indicated below.

Jeffrey J. Sopko
Name of Attorney for Applicant(s)
May 29, 2001
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Signature of Attorney

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Bib Data Sheet

CONFIRMATION NO. 9039

SERIAL NUMBER 09/687,558	FILING DATE 10/13/2000 RULE	CLASS 455	GROUP ART UNIT 2683	ATTORNEY DOCKET NO. 33045
APPLICANTS Tetsuya Kubo, Kanagawa, JAPAN; Koichi Yamamoto, Kanagawa, JAPAN; Akinori Ohira, Kanagawa, JAPAN; Yukinari Inoue, Shizuoka, JAPAN;				
** CONTINUING DATA *****				
** FOREIGN APPLICATIONS ***** JAPAN HEI. 11-294010 10/15/1999				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 11/17/2000				
Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature _____ Initials _____	STATE OR COUNTRY JAPAN	SHEETS DRAWING 6	TOTAL CLAIMS 6
INDEPENDENT CLAIMS 4				
ADDRESS 000116				
TITLE Portable cellular phone				
FILING FEE RECEIVED 920	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	